

Fill in this information to identify the case:

United States Bankruptcy Court for the:

**Western District of Texas**

Case number (if known): \_\_\_\_\_ Chapter 11

Check if this is an amended filing

## Official Form 201

### Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/24

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>Saiprasad LLC</u>		
2. All other names debtor used in the last 8 years	<u>Lotus Inn ( Fire Side Inn)</u>		
Include any assumed names, trade names, and <i>doing business as names</i>			
3. Debtor's federal Employer Identification Number (EIN)	<u>8 8 - 0 5 9 7 0 8 7</u>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business	
	<u>1259 Austin Hwy</u>	Number	Street
	<u>San Antonio, TX 78209</u>	City	State ZIP Code
	<u>Bexar</u>	County	
5. Debtor's website (URL)			
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor	<b>Saiprasad LLC</b>	Case number (if known)
Name		
<b>7. Describe debtor's business</b>		
A. Check one:		
<input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A)) <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44)) <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A)) <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6)) <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3)) <input checked="" type="checkbox"/> None of the above		
B. Check all that apply:		
<input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. §501) <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3) <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))		
C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <a href="http://www.uscourts.gov/four-digit-national-association-naics-codes">http://www.uscourts.gov/four-digit-national-association-naics-codes</a> .		
<u>7</u> <u>2</u> <u>1</u> <u>1</u>		
<b>8. Under which chapter of the Bankruptcy Code is the debtor filing?</b>		
Check one:		
<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11. Check all that apply:		
<input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that). <input checked="" type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). <input checked="" type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11. <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). <input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form. <input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.		
<input type="checkbox"/> Chapter 12		
<b>9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?</b>		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. District _____ When _____ Case number _____ MM / DD / YYYY		
If more than 2 cases, attach a separate list.		
District _____ When _____ Case number _____ MM / DD / YYYY		
<b>10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?</b>		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Debtor _____ Relationship _____ District _____ When _____ MM / DD / YYYY		
List all cases. If more than 1, attach a separate list.		
District _____ When _____ Case number, if known _____		

Debtor Name	<u>Saiprasad LLC</u>	Case number (if known)
<b>11. Why is the case filed in this district?</b> <i>Check all that apply:</i>		
<input checked="" type="checkbox"/> Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district. <input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.		
<b>12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?</b>		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed. <b>Why does the property need immediate attention? (Check all that apply.)</b> <input type="checkbox"/> It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? <hr/> <input type="checkbox"/> It needs to be physically secured or protected from the weather. <input type="checkbox"/> It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options). <input type="checkbox"/> Other _____		
<b>Where is the property?</b> _____		
Number _____ Street _____  City _____ State _____ ZIP Code _____		
<b>Is the property insured?</b>		
<input type="checkbox"/> No <input type="checkbox"/> Yes. Insurance agency _____ Contact name _____ Phone _____		

**Statistical and administrative information**

<b>13. Debtor's estimation of available funds?</b>	<i>Check one:</i>		
	<input type="checkbox"/> Funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.		
<b>14. Estimated number of creditors</b>	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,000-100,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<b>15. Estimated assets</b>	<input type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$500,001-\$1 million	<input checked="" type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$1,000,000,001-\$10 billion <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> More than \$50 billion

Debtor	<u>Saiprasad LLC</u>			Case number (if known)
	Name			
<b>16. Estimated liabilities</b>	<input type="checkbox"/> \$0-\$50,000	<input checked="" type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion	
	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion	
	<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion	
	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion	

### Request for Relief, Declaration, and Signatures

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature of authorized representative of debtor**

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/31/2025  
MM/ DD/ YYYY

/s/ Miltul J. Patel

Signature of authorized representative of debtor

Miltul J. Patel

Printed name

Title

President

**18. Signature of attorney**

/s/ Joyce W. Lindauer

Signature of attorney for debtor

Date 03/31/2025

MM/ DD/ YYYY

Joyce W. Lindauer

Printed name

Joyce W. Lindauer Attorney, PLLC

Firm name

1412 Main St. Suite 500

Number Street

Dallas

City

TX

State

75202

ZIP Code

(972) 503-4033

Contact phone

joyce@joycelindauer.com

Email address

21555700

Bar number

TX

State

IN THE UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF TEXAS  
SAN ANTONIO DIVISION

IN RE: **Saiprasad LLC**

CASE NO

CHAPTER 11

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 03/31/2025

Signature \_\_\_\_\_

/s/ Mitul J. Patel

Mitul J. Patel , President

**Attorney General of Texas**  
Bankruptcy Div  
PO Box 12548  
Austin, TX 78711-2548

**Bexar County Appraisal  
District**  
411 N. Frio Street  
San Antonio, TX 78207

**Internal Revenue Service**  
Centralized Insolvency Operations  
PO Box 7346  
Philadelphia, PA 19101-7346

**Jayprakash "Sunil" T. Patel**  
4308 Kingsbury Drive Suite 240  
Richardson, TX 75080

**Mahesh Patel**  
2929 N. Central Expressway Suite 240  
Richardson, TX 75080

**Shivprem LLC**  
The Lotus Inn (Fire Side Inn)  
1259 Austin Hwy  
San Antonio, TX 78209

**Texas Comptroller of Public  
Accounts**  
Bankruptcy and Lien Section  
Revenue Accounting Division  
PO Box 13528  
Austin, TX 78711-3528

**Texas Workforce Commission**  
101 East 15th Street  
Austin, TX 78778-0001

**United States Trustee**

PO Box 1539  
San Antonio, TX 78295

State Bar No. 24555700

Joyce W. Lindauer Attorney, PLLC

1412 Main Street, Suite 500

Dallas, Texas 75202

Telephone: (972) 503-4033

Facsimile: (972) 503-4034

PROPOSED ATTORNEYS FOR DEBTOR

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE WESTERN DISTRICT OF TEXAS  
SAN ANTONIO DIVISION**

**IN RE:**

**SAIPRASAD LLC**  
**d/b/a Lotus Inn (Fire Side Inn),**

**Debtor.**§  
§  
§  
§  
§**CASE NO. \_\_\_\_\_**  
**Chapter 11**

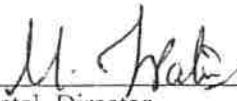
**DECLARATION OF MITUL PATEL**

STATE OF TEXAS              )  
                                )  
COUNTY OF BEXAR            )

"My name is Mitul Patel and I am over eighteen (18) years of age. I am a Director of Saiprasad LLC d/b/a Lotus Inn (Fire Side Inn). I have never been convicted of a crime and am fully competent to make this Declaration. I have personal knowledge of the facts stated herein and they are all true and correct.

1. The Debtor does not prepare a Balance Sheet, Statement of Operations or Cash Flow Statement in the ordinary course of business.
2. A copy of the Debtor's 2023 Federal Income Tax return is attached.
3. I declare under penalty of perjury that the statements contained herein are true and correct.

EXECUTED this 31st day of March, 2025.


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Mitul Patel, Director

**Form 1065****U.S. Return of Partnership Income**

OMB No. 1545-0123

For calendar year 2023, or tax year beginning 01/01, 2023, ending 12/31, 2023.Go to [www.irs.gov/Form1065](http://www.irs.gov/Form1065) for instructions and the latest information.**2023**Department of the Treasury  
Internal Revenue Service

A Principal business activity

Name of partnership

Saiprasad LLC

D Employer identification number

88-0597087

Accommodation

Number, street, and room or suite no. If a P.O. box, see instructions.

B Principal product or service

2755 N Interstate 35

E Date business started

Accommodation

City or town, state or province, country, and ZIP or foreign postal code

F Total assets

C Business code number

San Antonio TX 78208

(see instructions)

721110

\$ 1,342,733

G Check applicable boxes: (1)  Initial return (2)  Final return (3)  Name change (4)  Address change (5)  Amended returnH Check accounting method: (1)  Cash (2)  Accrual (3)  Other (specify):

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year: 2

J Check if Schedules C and M-3 are attached K Check if partnership: (1)  Aggregated activities for section 465 at-risk purposes (2)  Grouped activities for section 469 passive activity purposes**Caution:** Include **only** trade or business income and expenses on lines 1a through 23 below. See instructions for more information.

	1a Gross receipts or sales	165,832	b Less returns and allowances	c Balance	1c 165,832
Income	2 Cost of goods sold (attach Form 1125-A)				2
	3 Gross profit. Subtract line 2 from line 1c				3 165,832
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)				4 0
	5 Net farm profit (loss) (attach Schedule F (Form 1040))				5 0
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)				6
	7 Other income (loss) (attach statement)				7 0
	<b>8 Total income (loss).</b> Combine lines 3 through 7				8 165,832
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)				9
	10 Guaranteed payments to partners				10 0
	11 Repairs and maintenance				11 3,673
	12 Bad debts				12
	13 Rent				13
	14 Taxes and licenses				14 24,975
	15 Interest (see instructions)				15 76,457
	16a Depreciation (if required, attach Form 1562)		16a 24,985		16c 24,985
	b Less depreciation reported on Form 1125-A and elsewhere on return		16b		
	17 Depletion ( <b>Do not deduct oil and gas depletion.</b> )				17
	18 Retirement plans, etc.				18
	19 Employee benefit programs				19
	20 Energy efficient commercial buildings deduction (attach Form 7205)				20
	21 Other deductions (attach statement)				21 83,429
	<b>22 Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 21				22 213,519
	<b>23 Ordinary business income (loss).</b> Subtract line 22 from line 8				23 -47,687
Tax and Payment	24 Interest due under the look-back method—completed long-term contracts (attach Form 8697)				24
	25 Interest due under the look-back method—income forecast method (attach Form 8866)				25
	26 BBA AAR imputed underpayment (see instructions)				26
	27 Other taxes (see instructions)				27
	<b>28 Total balance due.</b> Add lines 24 through 27				28 0
	29 Elective payment election amount from Form 3800				29 0
	30 Payment (see instructions)				30
	<b>31 Amount owed.</b> If the sum of line 29 and line 30 is smaller than line 28, enter amount owed				31 0
	<b>32 Overpayment.</b> If the sum of line 29 and line 30 is larger than line 28, enter overpayment				32 0

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below?  
See instructions.  Yes  No**Sign Here**

Signature of partner or limited liability company member

Date

**Paid Preparer Use Only**

Print/Type preparer's name

Murtaza Cassim

Preparer's signature



Date

Check  if self-employed

PTIN P02285992

Firm's name Cassim Accounting Services LLC

Firm's EIN 84-3497350

Firm's address 7510 derby vista

Selma

TX 78154

Phone no. (210)803-7919

Form 1065 (2023)

Page 2

**Schedule B Other Information**

<b>1</b>	What type of entity is filing this return? Check the applicable box:	<b>Yes</b>	<b>No</b>		
a	<input type="checkbox"/> Domestic general partnership	b <input type="checkbox"/> Domestic limited partnership			
c	<input checked="" type="checkbox"/> Domestic limited liability company	d <input type="checkbox"/> Domestic limited liability partnership			
e	<input type="checkbox"/> Foreign partnership	f <input type="checkbox"/> Other: _____			
<b>2</b>	At the end of the tax year:				
a	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership . . . . .		x		
b	Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership . . . . .		x		
<b>3</b>	At the end of the tax year, did the partnership:				
a	Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below . . . . .		x		
	(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock	
b	Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below . . . . .		x		
	(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
<b>4</b>	Does the partnership satisfy <b>all four</b> of the following conditions?	<b>Yes</b>	<b>No</b>		
a	The partnership's total receipts for the tax year were less than \$250,000.				
b	The partnership's total assets at the end of the tax year were less than \$1 million.				
c	Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.				
d	The partnership is not filing Form 1065 and is not required to file Schedule M-3 . . . . .		x		
	If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.				
<b>5</b>	Is this partnership a publicly traded partnership, as defined in section 469(k)(2)? . . . . .		x		
<b>6</b>	During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? . . . . .				
<b>7</b>	Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction? . . . . .		x		
<b>8</b>	At any time during calendar year 2023, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country . . . . .		x		
<b>9</b>	At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions . . . . .		x		
<b>10a</b>	Is the partnership making, or had it previously made (and not revoked), a section 754 election? If "Yes," enter the effective date of the election . . . . . See instructions for details regarding a section 754 election.		x		
b	For this tax year, did the partnership make an optional basis adjustment under section 743(b)? If "Yes," enter the total aggregate net positive amount \$ _____ and the total aggregate net negative amount \$ ( _____ ) of such section 743(b) adjustments for all partners made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions . . . . .		x		

Form 1065 (2023)

Page 3

Schedule B Other Information (continued)	Yes	No
c For this tax year, did the partnership make an optional basis adjustment under section 734(b)? If "Yes," enter the total aggregate net positive amount \$ ..... and the total aggregate net negative amount \$ ( ..... ) of such section 734(b) adjustments for all partnership property made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions .....		x
d For this tax year, is the partnership required to adjust the basis of partnership property under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," enter the total aggregate amount of such section 743(b) adjustments and/or section 734(b) adjustments for all partners and/or partnership property made in the tax year \$ ..... The partnership must also attach a statement showing the computation and allocation of the basis adjustment. See instructions .....		x
11 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) .....		
12 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property? .....		x
13 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions .....		
14 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partner? .....		x
15 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return .....		
16a Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions .....		x
b If "Yes," did you or will you file required Form(s) 1099? .....		x
17 Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return .....		
18 Enter the number of partners that are foreign governments under section 892 .....		
19 During the partnership's tax year, did the partners make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)? .....		x
20 Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938 .....		x
21 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)? .....		x
22 During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 2142? See instructions .....		x
If "Yes," enter the total amount of the disallowed deductions \$ .....		
23 Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions .....		x
24 Does the partnership satisfy one or more of the following? See instructions .....		x
a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$29 million and the partnership has business interest expense.		
c The partnership is a tax shelter (see instructions) and the partnership has business interest expense.		
If "Yes" to any, complete and attach Form 8990.		
25 Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? .....		x
If "Yes," enter the amount from Form 8996, line 15 \$ ..... 0		
26 Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership .....		
Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
27 At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8? .....		x
28 Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By vote: ..... By value: .....		x
29 Is the partnership required to file Form 7208 relating to the excise tax on repurchase of corporate stock (see instructions):		
a Under the applicable foreign corporation rules? .....		x

Form 1065 (2023)

Page 4

<b>Schedule B Other Information (continued)</b>		<b>Yes</b>	<b>No</b>
<b>b</b>	Under the covered surrogate foreign corporation rules? . . . . .		<input checked="" type="checkbox"/>
	If "Yes" to either (a) or (b), complete Form 7208, Excise Tax on Repurchase of Corporate Stock. See the Instructions for Form 7208.		
<b>30</b>	At any time during this tax year, did the partnership (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? See instructions . . . . .		<input checked="" type="checkbox"/>
<b>31</b>	Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 . . . . . If "No," complete Designation of Partnership Representative below.		<input checked="" type="checkbox"/>

**Designation of Partnership Representative** (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR Mitul J Patel

U.S. address of PR	2755 N Interstate 35 San Antonio TX 78208	U.S. phone number of PR	(712)579-8446
--------------------	--	-------------------------	---------------

If the PR is an entity, name of the designated individual for the PR

U.S. address of designated individual	U.S. phone number of designated individual
---------------------------------------	--

Form 1065 (2023)

Client Copy

<b>Schedule K Partners' Distributive Share Items</b>		<b>Total amount</b>	
1	Ordinary business income (loss) (page 1, line 23)	1 -47,687	
2	Net rental real estate income (loss) (attach Form 8825)	2 0	
3a	Other gross rental income (loss)	3a	
b	Expenses from other rental activities (attach statement)	3b 0	
c	Other net rental income (loss). Subtract line 3b from line 3a	3c 0	
4	Guaranteed payments: a Services	4a 0	
b Capital		4b 0	
c Total. Add lines 4a and 4b		4c 0	
5	Interest income	5	
6	Dividends and dividend equivalents: a Ordinary dividends	6a	
b Qualified dividends	6b	c Dividend equivalents	6c
7	Royalties	7	
8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8 0	
9a	Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a 0	
b Collectibles (28%) gain (loss)		9b	
c Unrecaptured section 1250 gain (attach statement)		9c 0	
10	Net section 1231 gain (loss) (attach Form 4797)	10 0	
11	Other income (loss) (see instructions) Type:	11 0	
12	Section 179 deduction (attach Form 4562)	12 0	
13a	Cash contributions	13a 0	
b Noncash contributions		13b	
c Investment interest expense		13c	
d Section 59(e)(2) expenditures: (1) Type:		(2) Amount:	13d(2) 0
e Other deductions (see instructions) Type:		13e 0	
14a	Net earnings (loss) from self-employment	14a -47,687	
b Gross farming or fishing income		14b 0	
c Gross nonfarm income		14c 165,832	
15a	Low-income housing credit (section 42(j)(5))	15a 0	
b Low-income housing credit (other)		15b 0	
c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)		15c 0	
d Other rental real estate credits (see instructions) Type:		15d 0	
e Other rental credits (see instructions) Type:		15e 0	
f Other credits (see instructions) Type:		15f 0	
16	Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items—International, and check this box to indicate that you are reporting items of international tax relevance	<input type="checkbox"/>	
17a	Post-1986 depreciation adjustment	17a	
b Adjusted gain or loss		17b	
c Depletion (other than oil and gas)		17c	
d Oil, gas, and geothermal properties—gross income		17d	
e Oil, gas, and geothermal properties—deductions		17e	
f Other AMT items (attach statement)		17f 0	
18a	Tax-exempt interest income	18a	
b Other tax-exempt income		18b	
c Nondeductible expenses		18c 114	
19a	Distributions of cash and marketable securities	19a 0	
b Distributions of other property		19b 0	
20a	Investment income	20a	
b Investment expenses		20b	
c Other items and amounts (attach statement)		21	
21	Total foreign taxes paid or accrued		

**Analysis of Net Income (Loss) per Return**

1	Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13e, and 21	1	-47,687				
2	Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other
a	General partners	0	0	0	0	0	0
b	Limited partners	0	0	0	0	0	0

**Schedule L Balance Sheets per Books**

	Assets	Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
1	Cash . . . . .		2,712		
2a	Trade notes and accounts receivable . . . . .				
b	Less allowance for bad debts . . . . .		0		0
3	Inventories . . . . .				0
4	U.S. Government obligations . . . . .				
5	Tax-exempt securities . . . . .				
6	Other current assets (attach statement) . . . . .		0		0
7a	Loans to partners (or persons related to partners) . . . . .				113
b	Mortgage and real estate loans . . . . .				
8	Other investments (attach statement) . . . . .		0		0
9a	Buildings and other depreciable assets . . . . .	974,472		974,472	
b	Less accumulated depreciation . . . . .	21,867	952,605	46,852	927,620
10a	Depletable assets . . . . .		0		
b	Less accumulated depletion . . . . .		0		0
11	Land (net of any amortization) . . . . .		415,000		415,000
12a	Intangible assets (amortizable only) . . . . .			0	
b	Less accumulated amortization . . . . .		0	0	0
13	Other assets (attach statement) . . . . .		0		0
14	Total assets . . . . .		1,370,317		1,342,733
Liabilities and Capital					
15	Accounts payable . . . . .				
16	Mortgages, notes, bonds payable in less than one year . . . . .				
17	Other current liabilities (attach statement) . . . . .		3,732		21,584
18	All nonrecourse loans . . . . .				
19a	Loans from partners (or persons related to partners) . . . . .		95,948		130,500
b	Mortgages, notes, bonds payable in 1 year or more . . . . .		1,298,519		1,266,218
20	Other liabilities (attach statement) . . . . .		0		0
21	Partners' capital accounts . . . . .		-27,882		-75,569
22	Total liabilities and capital . . . . .		1,370,317		1,342,733

**Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return**

Note: The partnership may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books . . . . .	-47,801	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):	0	a	Tax-exempt interest \$	0
3	Guaranteed payments (other than health insurance) . . . . .	0			0
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13e, and 21 (itemize):		7	Deductions included on Schedule K, lines 1 through 13e, and 21, not charged against book income this year (itemize):	
a	Depreciation \$	0	a	Depreciation \$	0
b	Travel and entertainment \$	114			0
5	Add lines 1 through 4 . . . . .	114	8	Add lines 6 and 7 . . . . .	0
		-47,687	9	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	-47,687

**Schedule M-2 Analysis of Partners' Capital Accounts**

1	Balance at beginning of year . . . . .	-27,882	6	Distributions: a Cash . . . . .	0
2	Capital contributed: a Cash . . . . .		b	Property . . . . .	0
	b Property . . . . .		7	Other decreases (itemize):	0
3	Net income (loss) (see instructions) . . . . .	-47,687			0
4	Other increases (itemize):	0	8	Add lines 6 and 7 . . . . .	0
5	Add lines 1 through 4 . . . . .	-75,569	9	Balance at end of year. Subtract line 8 from line 5	-75,569

## Form 1065, Line 21: Other deductions

Meals and entertainment	Total Deductible amount	Deductible amount
50% of Meals & Entertainment	229	115
Total:	229	115

## Other Deductions Statement

Type	Amount
Automobile and truck expense	870
Bank Charges	202
Credit and collection costs	
Dues and subscriptions	
Insurance	17,597
Legal and professional	4,550
Meals @ 100% allowed	
Supplies	820
Tools	
Travel	
Utilities	41,106
Breakfast items	454
Cable	17,033
Pest control	682
Total:	83,314

## Line 20C Other item Statement

Description	Amount
Z - Section 199A qualified business income	-47,687
Total:	-47,687

## Statement - Schedule L Balance Sheets per Books - Line 17 - Other current liabilities (attach statement)

Type	Beginning of Year Amount	End of Year Amount
Credit card debt	2,438	1,323
Occupancy tax payl	1,294	20,261
Total:	3,732	21,584

**Schedule K-1  
(Form 1065)**Department of the Treasury  
Internal Revenue Service**2023**

For calendar year 2023, or tax year

beginning  /  / 2023 ending  /  /**Partner's Share of Income, Deductions,  
Credits, etc.**

See separate instructions.

**Part I Information About the Partnership****A** Partnership's employer identification number

88-0597087

**B** Partnership's name, address, city, state, and ZIP codeSaiprasad LLC  
2755 N Interstate 35

San Antonio TX 78208

**C** IRS center where partnership filed return:**D**  Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.

Mitul J Patel

2755 N Interstate 35

San Antonio TX 78208

**G**  General partner or LLC member-manager  Limited partner or other LLC member**H1**  Domestic partner  Foreign partner**H2**  If the partner is a disregarded entity (DE), enter the partner's:

TIN \_\_\_\_\_ Name \_\_\_\_\_

**I1** What type of entity is this partner? INDIVIDUAL**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here **J** Partner's share of profit, loss, and capital (see instructions)

Beginning

Ending

Profit	50 %	50 %
Loss	50 %	50 %
Capital	50 %	50 %

Check if decrease is due to:

 Sale or  Exchange of partnership interest. See instructions.**K1** Partner's share of liabilities:

Beginning Ending

Nonrecourse	\$ 0	\$ 0
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

**K2** Check this box if item K1 includes liability amounts from lower-tier partnerships **K3** Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions **L Partner's Capital Account Analysis**

Beginning capital account	\$ -13,941
Capital contributed during the year	\$
Current year net income (loss)	\$ -23,844
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ ( 0 )
Ending capital account	\$ -37,785

**M** Did the partner contribute property with a built-in gain (loss)? Yes  No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

 Final K-1  Amended K-1**Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	14	Self-employment earnings (loss)
	-23,844		
2	Net rental real estate income (loss)	15	Credits
	0		
3	Other net rental income (loss)	16	Schedule K-3 is attached if checked
	0		<input type="checkbox"/>
4a	Guaranteed payments for services	17	Alternative minimum tax (AMT) items
4b	Guaranteed payments for capital		
4c	Total guaranteed payments	0	
5	Interest income	18	Tax-exempt income and nondeductible expenses
	0		
6a	Ordinary dividends	19	Distributions
6b	Qualified dividends		
6c	Dividend equivalents	20	Other information
	0		
7	Penalties	Z	See Statement
	0		
8	Net short-term capital gain (loss)		
	0		
	Net long-term capital gain (loss)		
	0		
9b	Collectibles (28%) gain (loss)		
	0		
9c	Unrecaptured section 1250 gain		
	0		
10	Net section 1231 gain (loss)		
	0		
11	Other income (loss)		
	0		
12	Section 179 deduction	21	Foreign taxes paid or accrued
	0		0
13	Other deductions		
	0		

22  More than one activity for at-risk purposes\*23  More than one activity for passive activity purposes\*

\*See attached statement for additional information.

For IRS Use Only

**Schedule K-1 (1065) - Qualified Business Income Deduction**

SSTB	Qualified Business Income/(Loss)	Section 1231 Gain (Loss)	Section 179	W-2 Wages	Unadjusted Basis Immediately After Acquisition	Qualified REIT Dividends	Qualified PTP Income/(Loss)
	-23,844			0	0	0	0
Total:	-23,844			0	0	0	0

651123

OMB No. 1545 0123

**Schedule K-1  
(Form 1065)**Department of the Treasury  
Internal Revenue Service**2023**

For calendar year 2023, or tax year

beginning  /  / 2023 ending  / **Partner's Share of Income, Deductions,  
Credits, etc.**

See separate instructions.

<b>Part I Information About the Partnership</b>																																	
<p>A Partnership's employer identification number 88-0597087</p> <p>B Partnership's name, address, city, state, and ZIP code Saiprasad LLC 2755 N Interstate 35 San Antonio TX 78208</p> <p>C IRS center where partnership filed return:</p> <p>D <input type="checkbox"/> Check if this is a publicly traded partnership (PTP)</p>																																	
<b>Part II Information About the Partner</b>																																	
<p>E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)</p> <p>F Name, address, city, state, and ZIP code for partner entered in E. See instructions. Nishaben M Patel 2755 N Interstate 35 San Antonio TX 78208</p> <p>G <input type="checkbox"/> General partner or LLC member-manager <input checked="" type="checkbox"/> Limited partner or other LLC member</p> <p>H1 <input checked="" type="checkbox"/> Domestic partner <input type="checkbox"/> Foreign partner</p> <p>H2 <input type="checkbox"/> If the partner is a disregarded entity (DE), enter the partner's: TIN _____ Name _____</p> <p>I1 What type of entity is this partner? INDIVIDUAL</p> <p>I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here <input type="checkbox"/></p> <p>J Partner's share of profit, loss, and capital (see instructions)  <table border="1"> <thead> <tr> <th style="text-align: left;">Beginning</th> <th style="text-align: right;">Ending</th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">Profit</td> <td style="text-align: right;">50 %</td> </tr> <tr> <td style="text-align: left;">Loss</td> <td style="text-align: right;">50 %</td> </tr> <tr> <td style="text-align: left;">Capital</td> <td style="text-align: right;">50 %</td> </tr> </tbody> </table>   Check if decrease is due to:  <input type="checkbox"/> Sale or <input type="checkbox"/> Exchange of partnership interest. See instructions.</p> <p>K1 Partner's share of liabilities:  <table border="1"> <thead> <tr> <th style="text-align: left;">Beginning</th> <th style="text-align: right;">Ending</th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">Nonrecourse \$</td> <td style="text-align: right;">\$ 0</td> </tr> <tr> <td style="text-align: left;">Qualified nonrecourse financing \$</td> <td style="text-align: right;">\$ 5</td> </tr> <tr> <td style="text-align: left;">Recourse \$</td> <td style="text-align: right;">\$ 0</td> </tr> </tbody> </table> </p> <p>K2 Check this box if item K1 includes liability amounts from lower-tier partnerships <input type="checkbox"/></p> <p>K3 Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions <input type="checkbox"/></p> <p>L Partner's Capital Account Analysis  <table border="1"> <thead> <tr> <th style="text-align: left;">Beginning capital account</th> <th style="text-align: right;">\$ -13,941</th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">Capital contributed during the year</td> <td style="text-align: right;">\$ 0</td> </tr> <tr> <td style="text-align: left;">Current year net income (loss)</td> <td style="text-align: right;">\$ -23,843</td> </tr> <tr> <td style="text-align: left;">Other increase (decrease) (attach explanation)</td> <td style="text-align: right;">\$ 0</td> </tr> <tr> <td style="text-align: left;">Withdrawals and distributions</td> <td style="text-align: right;">\$ ( 0 )</td> </tr> <tr> <th style="text-align: left;">Ending capital account</th> <th style="text-align: right;">\$ -37,784</th> </tr> </tbody> </table> </p> <p>M Did the partner contribute property with a built-in gain (loss)?  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach statement. See instructions.</p> <p>N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)  <table border="1"> <thead> <tr> <th style="text-align: left;">Beginning</th> <th style="text-align: right;">\$ 0</th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">Ending</td> <td style="text-align: right;">\$ 0</td> </tr> </tbody> </table> </p>		Beginning	Ending	Profit	50 %	Loss	50 %	Capital	50 %	Beginning	Ending	Nonrecourse \$	\$ 0	Qualified nonrecourse financing \$	\$ 5	Recourse \$	\$ 0	Beginning capital account	\$ -13,941	Capital contributed during the year	\$ 0	Current year net income (loss)	\$ -23,843	Other increase (decrease) (attach explanation)	\$ 0	Withdrawals and distributions	\$ ( 0 )	Ending capital account	\$ -37,784	Beginning	\$ 0	Ending	\$ 0
Beginning	Ending																																
Profit	50 %																																
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Beginning	\$ 0																																
Ending	\$ 0																																

<b>Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items</b>		
1 Ordinary business income (loss)	14	Self-employment earnings (loss)
-23,843		
2 Net rental real estate income (loss)	0	
0		
3 Other net rental income (loss)	15	Credits
0		
4a Guaranteed payments for services		
4b Guaranteed payments for capital	16	Schedule K-3 is attached if checked <input type="checkbox"/>
0		
4c Total guaranteed payments	17	Alternative minimum tax (AMT) items
0		
5 Interest income	0	
0		
6a Ordinary dividends	0	
0		
6b Qualified dividends	18	Tax-exempt income and nondeductible expenses
0		
6c Dividend equivalents	C 57	
0		
7 Penalties	0	
0		
8 Net short-term capital gain (loss)	0	
0		
9b Collectibles (28%) gain (loss)	0	
0		
9c Unrecaptured section 1250 gain	0	
0		
10 Net section 1231 gain (loss)	0	
0		
11 Other income (loss)	0	
0		
12 Section 179 deduction	21	Foreign taxes paid or accrued
0		
13 Other deductions		
0		
22 <input type="checkbox"/> More than one activity for at-risk purposes*		
23 <input type="checkbox"/> More than one activity for passive activity purposes*		
*See attached statement for additional information.		
For IRS Use Only		

## Schedule K-1 (1065) - Qualified Business Income Deduction

SSTB	Qualified Business Income/(Loss)	Section 1231 Gain (Loss)	Section 179	W-2 Wages	Unadjusted Basis Immediately After Acquisition	Qualified REIT Dividends	Qualified PTP Income/(Loss)
	-23,843			0	0	0	0
Total:	-23,843			0	0	0	0

**Form 4562****Depreciation and Amortization**  
**(Including Information on Listed Property)**

OMB No. 1545-0172

**2023**Attachment  
Sequence No. 179Department of the Treasury  
Internal Revenue ServiceGo to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.Name(s) shown on return  
Saiprasad LLCBusiness or activity to which this form relates  
1065Identifying number  
88-0597087**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions) . . . . .	1	1,160,000
2 Total cost of section 179 property placed in service (see instructions) . . . . .	2	0
3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	3	2,890,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	4	0
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . .	5	1,160,000
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29 . . . . .	7	0
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 . . . . .	8	0
9 Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8 . . . . .	9	0
10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 . . . . .	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	0
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than \$1,160,000 . . . . .	12	0
13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 11 . . . . .	13	0

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions . . . . .	14	0
15 Property subject to section 168(f)(1) election . . . . .	15	0
16 Other depreciation (including ACRS) . . . . .	16	0

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

Section A						
17 MACRS deductions for assets placed in service in tax years beginning before 2023 . . . . .	17	24,985				
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>						

**Section B—Assets Placed in Service During 2023 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Monthly year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		0	0			0
b 5-year property		0	0			0
c 7-year property		0	0			0
d 10-year property		0	0			0
e 15-year property		0	0			0
f 20-year property		0	0			0
g 25-year property		0	25 yrs.		S/L	0
h Residential rental property		0	27.5 yrs.	MM	S/L	0
i Nonresidential real property		0	27.5 yrs.	MM	S/L	0
		0	39 yrs.	MM	S/L	0
		0	0	MM	S/L	0

**Section C—Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System**

20a Class life	0	0		S/L		0
b 12-year	0	12 yrs.		S/L		0
c 30-year	0	30 yrs.	MM	S/L		0
d 40-year	0	40 yrs.	MM	S/L		0

**Part IV Summary (See instructions.)**

21 Listed property. Enter amount from line 28 . . . . .	21	0
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions . . . . .	22	24,985
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .	23	

**Part V Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A—Depreciation and Other Information (Caution:** See the instructions for limits for passenger automobiles.)

<b>24a</b> Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>24b</b> If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No						
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions .						25	0	
26 Property used more than 50% in a qualified business use:  %								
27 Property used 50% or less in a qualified business use:  %						S/L -		
						S/L -		
						S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .						0		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 .						29	0	

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (don't include commuting miles) .	0	0	0	0	0	0
31 Total commuting miles driven during the year .		0	0	0	0	0
32 Total other personal (noncommuting) miles driven . . . . .	0	0	0	0	0	0
33 Total miles driven during the year. Add lines 30 through 32 . . . . .	0	0	0	0	0	0
34 Was the vehicle available for personal use during off-duty hours? <input type="checkbox"/> Yes <input type="checkbox"/> No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person? .						
36 Is another vehicle available for personal use? .						

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? . . . . .	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . . .		
39 Do you treat all use of vehicles by employees as personal use? . . . . .		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? . . . . .		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions . . . . .		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year		
42 Amortization of costs that begins during your 2023 tax year (see instructions):							
43 Amortization of costs that began before your 2023 tax year . . . . .						43	0
44 Total. Add amounts in column (f). See the instructions for where to report . . . . .						44	0

## 2023 Asset Depreciation Report

Description(Type)	Date In Svc	Cost / Basis	Prior Basis	Bus. Use Bonus	Method Cv	Life	Crnt. 179	Crnt. Bonus	Crnt. Prior Reg.	Crnt. Depr.	Next Year	Prior Crnt.	Crnt. AMT	Crnt. AMT	Prior Crnt.	Amo.	Dep.	Prior. Amo.	Dep.
<b>Parent Form: 1065</b>																			
Building(Non residential real property)	02/25/2022	974,472	0	100 S/L	MM	39			0	21,867	24,985	24,985	24,985	0					
Land(Land)	02/25/2022	415,000	0	100	0				0	0	0	0	0	0	0	0	0	0	
Total :		1,389,472	0				0	0	0	21,867	24,985	24,985	0	24,985	0	0	0	0	